							10010417					
						-	Application or Docket Number					
	PATENT APPLICATION FEE DETERMINATION RECO						10 6 04/27				<u> </u>	
Effective October 1: 2001							1	7	7	1600	1	
·	CLAIMS AS FILED - PART I							100	14	779		
(Column 1) (Column 2)								ENTITY	ÓD		RTHAN	
F	OR	NUMB	ER FILED	NUMBER		7 6	RATE	FEE	OR 7	RATE	ENTITY	
BASIC FEE								370.	OR		740	
TOTAL CLAIMS		1/2	minus	20= •		1 1	X\$ 9=		OR	2000	/	
IN	DEPENDENT C	CLAIMS 7	minus	3 = *		7	x362			25	·	
M	MULTIPLE DEPENDENT CLAIM PRESENT						14		OR	8		
If the difference in column 1 is less than zero, enter "0" in column 2						<b>-</b> L	+130=		OR	+260=		
							TOTAL		OR	TOTAL	$\nabla 4 \Lambda$	
CLAIMS AS AMENDED - PART II									•	OTHER	THAN	
-	CONTRACTOR OF THE	(Column 1)	No.	(Column 2)	(Column 3	<u>,                                    </u>	MALL	ENTITY	OR	SMALL	ENTITY	
A P		REMAINING AFTER		NUMBER PREVIOUSLY	PRESENT EXTRA	<b>   </b>   ,	RATE	ADDI- TIONAL		RATE	ADDI- TIONAL	
8		AMENDMENT		PAID FOR	-	┨┝	<u> </u>	FEE	i		FEE	
AMENDMENT	Total Independent	1/8	Minus	- 20	= 0	<b>↓</b>	<b>K\$</b> 9=		OR	X\$18=		
AN		NTATION OF M	1	PENDENT CLAIM	1 0.	4   3	X39=		QR.	X78=		
		STATE OF THE		PENDENI CLAIM		1	120-			. 000		
٠.		· .	٠.			L	130=		OR	+260=		
	World					ADI	TOTAL OIT. FEE		OR	TOTAL ADDIT. FEE		
-70.00	10/24/04	(Column 1)		(Column 2)	(Column 3)				٠.			
60	1.0	CLAIMS REMAINING		HIGHEST NUMBER	PRESENT			ADDI-			ADDI-	
Z		AFTER AMENOMENT		PREVIOUSLY PAID FOR	EXTRA	l l .F	MTE	TIONAL		RATE	TIONAL	
EURORURI	Total	0	Minus .	**	=		<b>3</b> 9=	FEE		·X\$18=	FEE	
S S	Independent		Minus	WV V	= )	-			OR	V\$10=		
ર્લ	FIRST PRESE	NTATION OF MI	LTIPLE DE	ENDENT CLAIM			(39=		OR.	. X78≃	,	
			•			<b>'</b>   •	130=.		OR	+260=		
						AD0	TOTAL		OR .	TOTAL ADDIT: FEE		
(Column 1) (Column 2) (Column 3)							*** ****		•	DUIT FEEL		
,	4	CLAIMS	My Victory	HIGHEST			. 1	ADD!			400	
30		REMAINING AFTER AMENDMENT		PREVIOUSLY PAID FOR	PRESENT EXTRA	R	ATE	ADDI- TIONAL		RATE.	ADDI- TIONAL	
AMENDIMENT	Total	\$	Minus	tt	<b>.</b>	X	\$ 9=	FEE		X\$18=	FEE	
H	tridebeudent	•	Minus	414	E ,	1	39=		OR	X78=		
•	FIRST PRESE	NTATION OF ML	ILTIPLE DEP	ENDENT CLAIM	-	<u>                                   </u>		'	OR	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		

If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

ADDIT FEE

OR

ADDIT FEE

OR

ADDIT FEE

OR

TOTAL

OR

TO OR ADDIT FEE

OR

+260=

- TOTAL

+130=